

A key to widespread broadband deployment is ensuring that broadband providers have timely and cost-effective access to rights-of-way so that they can build out their networks across the Nation. These networks often need to cross large areas of land owned or controlled by the Federal Government. Thus, effective and efficient Federal rights-of-way policies and practices are critical for promoting broadband deployment.

To ensure that the Federal Government's rights-of-way policies and practices facilitate the aggressive deployment of broadband networks, my Administration created a Federal Rights-of-Way Working Group composed of representatives from most of the major Federal agencies with land management responsibilities. The mission of the Working Group was to identify and recommend changes in Federal policies, procedures, regulations, and practices that would improve the process of granting rights-of-way for broadband communications networks on lands under Federal jurisdiction.

Based on information gathered from the communications industry, the Federal agencies, state, local, and tribal representatives, and other stakeholders, the Working Group has produced a report entitled, "Improving Rights-of-Way Management Across Federal Lands: A Roadmap for Greater Broadband Deployment," which sets forth specific recommendations in four main areas.

- (1) Information Access and Collection—to streamline and standardize applications to reduce the administrative burden and costs on broadband providers.
- (2) Timely Process—to speed Federal agencies' consideration of rights-of-way applications.
- (3) Fees—to ensure that fees charged by Federal agencies are reasonable and appropriate.
- (4) Compliance—to ensure that Federal agencies have the proper tools to promote compliance with rights-of-way grants or permits.

These recommendations are designed to assist Federal agencies in efficiently and effectively performing their vital role as stewards of the public lands, while working coop-

eratively with industry to spur broadband deployment.

Therefore, I hereby direct the heads of executive departments and agencies (agencies) to take appropriate actions to implement the specific recommendations contained in the report to the maximum extent practicable and as permitted by law.

In addition, agencies should review their existing policies and procedures and identify any additional ways to improve the process for granting rights-of-way for broadband communications networks. Agencies should report to me, through the Director of the Office of Management and Budget, within 1 year of the date of this memorandum on all actions taken. The agencies shall take these actions using existing budget authority.

George W. Bush

Remarks in a Discussion on the Benefits of Health Care Information Technology in Baltimore, Maryland *April 27, 2004*

The President. Thanks a lot. Thanks for coming. Please be seated. Thanks for the hospitality. I'm really pleased to be here in the great city of Baltimore. Governor, I'm proud you're here. Thanks for greeting us at the airport—I mean, at the heliport. Thanks for bringing the first lady. Thanks for bringing the Lieutenant Governor as well. I'm proud you all are here.

I'm also proud to be with—in the presence of a man I still call Governor, Governor Schaefer. I'm proud you're here, Governor. He said he didn't care a whit about seeing me. He just wanted to make sure I gave his best to Mother. [*Laughter*] Still a plain-spoken fellow, aren't you?

But Governor, thanks, you're doing a great job for the State of Maryland, and congratulations on the newest Ehrlich.

Dutch Ruppersberger is with us today. Congressman, where are you? Oh, thanks for coming. Listen, I'm—here's the thing about the Congressman: He cares deeply about the people who wear the Nation's uniform. He's very much involved with programs to kind of lighten the load for our troops who are sacrificing and are working for a free world.

Dutch, I'm proud of the job you've done. I know you've recently received the USO Merit Award. Well deserved, and congratulations. Thank you for doing that.

I want to thank George Owings and Larry Kimble, who are veterans affairs folks here for the State of Maryland. One is incoming. One is outgoing. Both care deeply about the veterans of this State. I appreciate so very much Nelson Sabatini, who is department of health and human services here in Maryland, for caring about the health delivery systems of your State.

We're going to talk about some interesting opportunities today for our health care system to be modern, to deliver—help it deliver quality service at lower cost. This is going to be—I think you'll find it an interesting dialog. I'm certainly looking forward to it.

Before we begin, though, I want to thank the people who work here at this hospital, work for the VA. I appreciate your service to our country. I appreciate your care for those who have worn the Nation's uniform. I see we've got folks here who have worn and are wearing the Nation's uniform. For those who have worn the Nation's uniform, thank you for setting such a good example for the brave men and women. For those who are wearing the Nation's uniform, I appreciate so very much your service.

We're changing the world. We have an obligation and a duty to protect our country. And in so doing, we're changing the world for the better. We understand that freedom is the deepest need of every human heart and that free societies are peaceful societies. And a peaceful society in the heart of a region that has fostered terror and hatred is in our short-term and long-term interest. And for those who wear the uniform, thanks for what you're doing. You have stepped up at this historic time. And the country is more secure for it, and the world will be more peaceful for your service.

Yesterday I talked about ways for us to make sure America stays on the—stays a leader in the world, particularly when it comes to technology and innovation. That's what we want. We want to lead. We're not interested in following. America is a nation where the entrepreneurial spirit is strong, where the focus of the Government, in my

judgment, is right. We're willing to spend research money. I see Elias Zerhouni is with us, who's head of the NIH. Elias, thanks for coming. I'm confident that when you spend research money at the NIH, we're laying the groundwork for what will be a better tomorrow.

Yesterday I talked about energy. One way for us to stay on the leading edge of an innovative society is to introduce ideas like a hydrogen-powered automobile, put money behind it and research behind it so someday, Governor, we're able to drive around with water as the byproduct, as opposed to that which is currently coming out of the tailpipes in America. It'll make us less dependent on foreign sources of energy when this technology comes to be, which is vital to make sure America is on the leading edge of technology and innovation. It'll help improve the environment.

I talked about the need for us to spread broadband technology throughout our entire society if we want to stay competitive and innovative, that we've got to have broadband in every household in America by the year 2007. And there's ways to do that with the Government having to provide all the capital. We ought not to tax access to broadband. If you want something to flourish, don't tax it.

As well we've got to make sure that regulatory policy in Washington is conducive for the spread of broadband. For example, one of the things that's probably going to need to be done is they're going to need to build towers on Federal lands in order for over-the-air Internet services to work out into the remote regions of our country. They don't need a bunch of paperwork and hassle in order to build the tower on Federal lands. There's a lot of things we can do to reduce the bureaucratic hurdles necessary to make sure that broadband is plentiful, and not only plentiful but there's competition so that you get better quality and better price.

But today we're going to talk about a third avenue that's—to make sure America is innovative and is a leader in the world, and that is how to make sure our health care system works better. And there are some fantastic ideas as to how to do that.

The way I like to kind of try to describe health care is, on the research side, we're the best. We're coming up with more innovative ways to save lives and to treat patients. Except when you think about the provider's side, we're kind of still in the buggy era. I told a story yesterday of a guy in Kalamazoo, Michigan. His young daughter has a case of leukemia, and he had to—she had to see a lot of specialists. But he had to carry her files around every time she saw a specialist in order to expedite care, to make sure she was getting the best care.

And the health care industry is missing an opportunity, if patients, in order to make sure they get quality care, have to carry files from one specialist to the next. It's like IT, information technology, hasn't shown up in health care yet. But it has in one place, in one department that you're about to hear from, and that's the Veterans Department.

So here's what we're here to talk about. We're here to talk about how to make sure the Government helps the health care industry become modern in order to enhance the quality of service, in order to reduce the cost of medicine, in order to make sure the patient, the customer, is the center of the health care decisionmaking process.

And we've made great progress. There's a role for the Federal Government. One thing is, the Federal Government has got to make sure the privacy rules are strong. You're going to hear us talk about electronic medical records, and that's exciting. But it's not so exciting if you're a patient who thinks somebody could snoop on your records, to put it bluntly. I'm not interested in having my—well, it's too late for me. *[Laughter]* My medical records are pretty well known.

But for those people—there's a lot of people in America who say, "Good. I want there to be good information technology in the health care field. I just don't want somebody looking at my records unless I give them permission to do so." And I fully understand that. No, your records are private if that's the way you want them to be, but there's the ways to address this, the privacy issue. And there's the ways to make sure that the Federal Government's role is helpful in expanding information technology, and that's what we're going to talk about.

Tommy Thompson is the head of the—the Secretary of Health and Human Services—is a strong advocate about the spread of IT throughout the health care industry. I think he's got—I know he's got the proper perspective of the role of the Federal Government in encouraging not only the Federal agencies but the private sector to adopt these strategies in a way that is positive for the American consumer and cost-beneficial for society.

You'll hear him talk about standards. I told him when he starts talking about standards, "Make sure it's the kind of language we all understand." See, that's part of the problem. The medical terminology is really different from English, and it's different from one office to the next. And so when Tommy is talking about standards, I think he'll help you understand how we can help with standards.

At any rate, we're doing some smart things at the Federal Government, and the Federal Government can lead because we're spending a lot of money in health care. We're a large consumer on behalf of the American people. Think about it: Medicare, Medicaid, veterans' benefits, Federal employee health insurance plans. I mean, there's a lot of money going through the Federal Government, and therefore it provides a good opportunity for the Federal Government to be on the leading edge of proper reform and change.

Tommy, thanks for your service. Let her go.

[Secretary of Health and Human Services Tommy G. Thompson made brief remarks.]

The President. Thanks, T, good job. It's estimated that they spend \$8,000 per worker on information technology in most industries in America, and \$1,000 per worker in the health care industry. And there's a lot of talk about productivity gains in our society, and that's because companies and industries have properly used information technology. If properly used, it is an industry-changer for the good. It enables there to be a better cost structure and better quality care delivered, in this case in the health field.

And yet the health care industry hasn't touched it, except for certain areas. And one area that has is the Veterans Administration.

You're about to hear an example from our Secretary and the administrator of this hospital and the assets here in Baltimore about forward thinking by people who care about the patients they serve. I know the veterans who are here are going to be proud to hear that the Veterans Administration is on the leading edge of change. That's what we expect. The taxpayers' money is being well spent.

And one of the reasons why the Veterans Administration is doing so well in changing, kind of, behavior, as well as making sure the backlog for veterans cases has been reduced, is because of our Secretary, a Vietnam vet, a really decent guy, and who is doing a fabulous job, Tony Principi.

[*Secretary of Veterans Affairs Anthony J. Principi made brief remarks.*]

The President. Thanks. I'm real proud of the job that you're doing here. Our job is to set the strategy. Smith's job here is to make sure they put it in place. [*Laughter*] Dennis Smith, as I've told you, runs the show here. Tell us how this happened. I mean, first of all, how long have you been working for the Veterans Administration?

Dennis Smith. Thirty-one years.

The President. Thirty-one years?

Mr. Smith. Yes, sir.

The President. You don't look that old. [*Laughter*]

Mr. Smith. Thank you.

The President. Maybe because you don't spend a lot of time in Washington. [*Laughter*] Explain your job, explain what this means—if you can possibly share some stories with us. You're doing a great job, by the way.

[*Mr. Smith, Director, VA Maryland Health Care System, made brief remarks.*]

The President. I presume it's cost effective?

Mr. Smith. It is.

The President. I mean, think about a system where you had to take each individual X-ray and put it in a shelf and get somebody to take it out of the shelf and put it back in the shelf and probably had to duplicate it just in case somebody wouldn't lose it. So when you hear him talk about cost-effective-

ness and productivity increases, this is what we're talking about. This system, when it gets advanced beyond the VA, will save American consumers a lot of money. If we're wise about how we use technology, we can save money.

Anyway, sorry to interrupt. [*Laughter*]

Mr. Smith. That's quite all right. [*Laughter*]

The President. The man knows the chain of command. [*Laughter*]

[*Mr. Smith made further remarks.*]

The President. Let me ask you, was it hard to get all the records computerized in the first place? I mean, somebody is listening out there who is running a hospital in Dallas, Texas. Are they going to say, "Gosh, this is such an overpowering startup that it makes no sense to do so?"

Mr. Smith. Well, with the VA, we kind of started years ago with this. We started with physician-order entry. And we had packages. We had a lab package. So we brought lab on board, where the physicians would order their lab work, and that would be automated. And then we went to various other systems. So it was gradual that we did it. It is a daunting task for the hospital sector to bring in a computerized medical record all at one time. So no doubt, but it has to be done, Mr. President. We have to do it.

The President. The goal I set is, most people ought to be covered within a 10-year period. It's not like in 10 days or 10 months. This is something that is going to take time to get there.

Tell me about the pharmaceuticals, the distribution of drugs, the barcoding, and how that affects—

[*Mr. Smith made further remarks.*]

The President. How do you deal with the privacy issue? In other words, there's some suspicious character around that doesn't—

Mr. Smith. Well, the nurses all have codes to get into the system, so you have to have a security code to get in. So before—you can't just go up to a computer. We have these on medication cards, laptops, so they have to type in a code to get into it. So we know—the system knows that, if I was a nurse, Dennis Smith is in the system. And I'm visiting

Mr. Principi in his room and click on, it will know that I'm administering the drug and who the patient is. It brings all that up. It's a very secure system. We've built security into this.

The President. Good. You're doing a great job.

Mr. Smith. Thank you, Mr. President.

The President. Thanks a lot. One of the things that's interesting, one of the challenges we face in our society—Governor Ehrlich understands this—is we've got to make sure we train people in the health care field who understand what they're doing when it comes to computers and information technology. There's a lot of jobs available in the health care field, and the community college system turns out to be a great laboratory for enhancing people's skills. And I appreciate your support of the community colleges here in Maryland, giving people a chance to learn a new skill to meet the challenges of the—when I say, “challenges of the 21st century,” here's one: Figure out how to use IT in a constructive way to save costs and improve quality care and to save lives. I suspect 20 years ago people who were in the health care field simply could not envision the use of computers and broadband and the Internet to make the field modern. And our education system has got to reflect that, Governor. I appreciate your understanding.

So far you've only heard from the public sector. It probably makes sense to hear from the private sector today as well, since the delivery of health care in the private sector is equally if not greater part of people's—the quality of medicine here in the country.

Johns Hopkins is one of the really great hospital university systems in America. It's world renowned, and it's quality care. With us today is Marlene Miller—Dr. Marlene Miller, I might add. She is in charge of the office of quality and safety initiatives at Hopkins. Tell us what that means, and just give us a sense of the challenges you face and the challenges we face in encouraging the spread of information technology to the private sector. Is Hopkins involved with any of this, or anything else you want to say?

[Dr. Marlene Miller, Director, Quality and Safety Initiatives, Johns Hopkins Children's Center, made brief remarks.]

The President. Yes, see, the VA has got an advantage because all the administrators work for the same outfit, the same organization. Hopkins stands alone. I suspect Hopkins doesn't do a very good job of conversing with M.D. Anderson in Houston. Two different languages—no, anyway. [Laughter]

And so the real challenge in the private sector is to take what the Johns Hopkins people have done intrahospital and have it be able to converse with both large and rural hospitals all across America. And that's where the Federal Government can help, like the development of standards. I guess you support the development of standards when it comes to talking over the Internet?

Dr. Miller. Absolutely.

The President. What other challenges do you see?

[Dr. Miller made further remarks.]

The President. Let me ask you something. Are you saying that these systems are able to build in a kind of a safety valve—in other words, automatically kick out a prescription if it doesn't meet the logic of the computer program?

Dr. Miller. One aspect of an ideal system, in my mind, is if I prescribe you 50 milligrams of something, but the 10 prior visits I prescribed you 5, I should get a warning flag, and say, “Look, do you really mean this?”

The President. But what you said about the weight, something—

Dr. Miller. Well, it's the same issue in children.

The President. If you've got small children, it is illogical to prescribe this much dosage.

Dr. Miller. Yes, the prescription I talked to you about was an adult-sized dose. No one, had they looked in any textbook, would have ever given that child that dose.

The President. Pretty good. That's why you've got to get the standards right, Tommy.

[Secretary Thompson and Secretary Principi made brief remarks.]

The President. This is a big challenge for us here in the country. Think of what we're talking about. We're just talking about how hospitals talk to each other. Then we've got

to get it so the docs are able to talk to each other, and they've got to buy into this.

And so the reason why we've started this process now is we want to encourage insurance companies and State Governments, doctors organizations, AMA and others, to understand the great benefit for the American people by implementing information technology in the health care field.

By introducing information technology, health care will be better, the cost will go down, the quality will go up, and there's no telling whether other benefits will inure to our society. In other words, when we get this done—and we will, because America is a land of doers and entrepreneurs; our job is to set the goal and then to encourage and incent people to achieve the goal—but when we get this implemented, America will remain on the leading edge of technological change. This is the kind of innovation that's practical and makes sense, that will keep us to be the leader in the world.

And when we're the leader of the world, it means our people have a chance to make a better living. See, when you're the leader, particularly when it comes to innovation and technology, your society improves a lot. The quality of life goes up. People's pay goes up. People in America are more likely to realize the American Dream. It's essential that we be in a society of innovators and change, and this is an area where there is a huge opportunity.

And I look forward to working with people to achieve this objective. I want to thank those up here who are doing a good job. Tony, you all have made us proud. I'm giving Tony the credit, but you deserve it. [*Laughter*]

Marlene, thank you for your vision. We look forward to working with Johns Hopkins as to how—to better learn how to encourage implementation of this opportunity. And when we get it done—we will—we will—this is America, after all. [*Laughter*] And when we get it done, we'll all be able to say, "We've done our duty, job well done. Now we go on to the next issue after this." But let's get this one right.

Thank you all for coming. We've enjoyed it. I hope you found it as interesting as I have to listen to the great opportunities in

front of us, some of the challenges that have been overcome, and recognizing that we've got other challenges to overcome. But our spirits are high. Our spirits are high because this country can overcome any challenge in our way.

God bless. Thank the healers who are here. God bless the veterans as well.

NOTE: The President spoke at 1:50 p.m. at the Department of Veterans Affairs Medical Center. In his remarks, he referred to Gov. Robert L. Ehrlich of Maryland, his wife, Kendel, and their newborn son, Joshua; former Gov. William Donald Schaefer of Maryland; George W. Owings, secretary-nominee, and Lawrence J. Kimble, acting secretary, Maryland Department of Veterans Affairs; and Nelson J. Sabatini, secretary, Maryland Department of Health and Mental Hygiene.

Executive Order 13335—Incentives for the Use of Health Information Technology and Establishing the Position of the National Health Information Technology Coordinator

April 27, 2004

By the authority vested in me as President by the Constitution and the laws of the United States of America, and to provide leadership for the development and nationwide implementation of an interoperable health information technology infrastructure to improve the quality and efficiency of health care, it is hereby ordered as follows:

Section 1. Establishment. (a) The Secretary of Health and Human Services (Secretary) shall establish within the Office of the Secretary the position of National Health Information Technology Coordinator.

(b) The National Health Information Technology Coordinator (National Coordinator), appointed by the Secretary in consultation with the President or his designee, will report directly to the Secretary.

(c) The Secretary shall provide the National Coordinator with appropriate staff, administrative support, and other resources to meet its responsibilities under this order.

(d) The Secretary shall ensure that the National Coordinator begins operations within 90 days of the date of this order.